

CIVIL COVER SHEET

The JS 44 civil cover sheet and the information contained herein neither replace nor supplement the filing and service of pleadings or other papers as required by law, except as provided by local rules of court. This form, approved by the Judicial Conference of the United States in September 1974, is required for the use of the Clerk of Court for the purpose of initiating the civil docket sheet. (SEE INSTRUCTIONS ON NEXT PAGE OF THIS FORM.)

I. (a) PLAINTIFFS		DEFENDANTS																									
<p>WSOU Investments, LLC d/b/a Brazos Licensing and Development</p> <p>(b) County of Residence of First Listed Plaintiff _____ (EXCEPT IN U.S. PLAINTIFF CASES)</p> <p>(c) Attorneys (Firm Name, Address, and Telephone Number) The Mort Law Firm, PLLC 100 Congress Ave, Suite 2000, Austin, TX 78701 (512) 865-7950</p>		<p>Hewlett Packard Enterprise Company</p> <p>County of Residence of First Listed Defendant _____ (IN U.S. PLAINTIFF CASES ONLY)</p> <p>NOTE: IN LAND CONDEMNATION CASES, USE THE LOCATION OF THE TRACT OF LAND INVOLVED.</p> <p>Attorneys (If Known)</p>																									
II. BASIS OF JURISDICTION (Place an "X" in One Box Only)		III. CITIZENSHIP OF PRINCIPAL PARTIES (Place an "X" in One Box for Plaintiff and One Box for Defendant)																									
<div><input type="checkbox"/> 1 U.S. Government Plaintiff</div> <div><input type="checkbox"/> 2 U.S. Government Defendant</div> <div><input checked="" type="checkbox"/> 3 Federal Question (U.S. Government Not a Party)</div> <div><input type="checkbox"/> 4 Diversity (Indicate Citizenship of Parties in Item III)</div>		<table border="1" style="width: 100%; border-collapse: collapse;"><thead><tr><th></th><th>PTF</th><th>DEF</th><th></th><th>PTF</th><th>DEF</th></tr></thead><tbody><tr><td>Citizen of This State</td><td><input type="checkbox"/> 1</td><td><input type="checkbox"/> 1</td><td>Incorporated or Principal Place of Business In This State</td><td><input type="checkbox"/> 4</td><td><input type="checkbox"/> 4</td></tr><tr><td>Citizen of Another State</td><td><input type="checkbox"/> 2</td><td><input type="checkbox"/> 2</td><td>Incorporated and Principal Place of Business In Another State</td><td><input type="checkbox"/> 5</td><td><input type="checkbox"/> 5</td></tr><tr><td>Citizen or Subject of a Foreign Country</td><td><input type="checkbox"/> 3</td><td><input type="checkbox"/> 3</td><td>Foreign Nation</td><td><input type="checkbox"/> 6</td><td><input type="checkbox"/> 6</td></tr></tbody></table>			PTF	DEF		PTF	DEF	Citizen of This State	<input type="checkbox"/> 1	<input type="checkbox"/> 1	Incorporated or Principal Place of Business In This State	<input type="checkbox"/> 4	<input type="checkbox"/> 4	Citizen of Another State	<input type="checkbox"/> 2	<input type="checkbox"/> 2	Incorporated and Principal Place of Business In Another State	<input type="checkbox"/> 5	<input type="checkbox"/> 5	Citizen or Subject of a Foreign Country	<input type="checkbox"/> 3	<input type="checkbox"/> 3	Foreign Nation	<input type="checkbox"/> 6	<input type="checkbox"/> 6
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IV. NATURE OF SUIT (Place an "X" in One Box Only) Click here for: Nature of Suit Code Descriptions.																											
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<div><input checked="" type="checkbox"/> 1 Original Proceeding</div> <div><input type="checkbox"/> 2 Removed from State Court</div> <div><input type="checkbox"/> 3 Remanded from Appellate Court</div> <div><input type="checkbox"/> 4 Reinstated or Reopened</div> <div><input type="checkbox"/> 5 Transferred from Another District (specify)</div> <div><input type="checkbox"/> 6 Multidistrict Litigation - Transfer</div> <div><input type="checkbox"/> 8 Multidistrict Litigation - Direct File</div>																											
VI. CAUSE OF ACTION		Cite the U.S. Civil Statute under which you are filing (Do not cite jurisdictional statutes unless diversity): 35 U.S.C. § 1 et seq.																									
Brief description of cause: Patent Infringement																											
VII. REQUESTED IN COMPLAINT:		CHECK IF THIS IS A CLASS ACTION UNDER RULE 23, F.R.Cv.P. <input type="checkbox"/> DEMAND \$ _____																									
VIII. RELATED CASE(S) IF ANY (See instructions):		CHECK YES only if demanded in complaint: JURY DEMAND: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No																									
JUDGE _____		DOCKET NUMBER _____																									
DATE: August 26, 2020																											
SIGNATURE OF ATTORNEY OF RECORD: /s/ Raymond W. Mort, III																											
FOR OFFICE USE ONLY																											
RECEIPT # _____	AMOUNT _____	APPLYING IFP _____	JUDGE _____																								
		MAG. JUDGE _____																									